

Docket No.  
BSS0018

## Declaration and Power of Attorney For Patent Application

### English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for

**UPSTREAM DATA BYPASS DEVICE FOR A VIDEO SYSTEM**

the specification of which

(check one)

☒ is attached hereto.

☐ was filed on \_\_\_\_\_ as United States Application No. or PCT International Application Number \_\_\_\_\_ and was amended on \_\_\_\_\_

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, or plant breeder's rights certificate(s), or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

\_\_\_\_\_  
(Number)

\_\_\_\_\_  
(Country)

\_\_\_\_\_  
(Day/Month/Year Filed)

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\_\_\_\_\_  
(Number)

\_\_\_\_\_  
(Country)

\_\_\_\_\_  
(Day/Month/Year Filed)

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\_\_\_\_\_  
(Number)

\_\_\_\_\_  
(Country)

\_\_\_\_\_  
(Day/Month/Year Filed)

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I hereby claim the benefit under 35 U.S.C. Section 119(e) of any United States provisional

_____	_____
(Application Serial No.)	(Filing Date)

_____	_____
(Application Serial No.)	(Filing Date)

_____	_____
(Application Serial No.)	(Filing Date)

I hereby claim the benefit under 35 U. S. C. Section 120 of any United States application(s), or Section 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. Section 112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, C. F. R., Section 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:

_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status)
		(patented, pending, abandoned)

_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status)
		(patented, pending, abandoned)

_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status)
		(patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office  
(list name and registration number)

Anthony Niewyk, Reg. No. 24,871  
John F. Hoffman Reg. No. 26,280  
Brian C. Pauls, Reg. No. 40,122  
Michael D. Schwartz, Reg. No. 44,326  
Adam F. Cox, Reg. No. 46,644  
Thomas A. Adams, Reg. No. 48,230  
Abigail M. Butler, Reg. No. 48,238  
Kevin R. Erdman, Reg. No. 33,687  
Kittsri Sukhapinda, Reg. No. 47,116  
Sarah M. Jabbari, Reg. No. 47,679

Eric J. Groen, Reg. No. 32,230  
Thomas A. Ladd, Reg. No. 32,543  
Gerard T. Gallagher, Reg. No. 39,679  
Daniel Tychonlevich, Reg. No. 41,358  
Dennis S. Schell, Reg. No. 48,696  
Kareem Howell, Reg. No. 53,039  
Keith J. Swedo, Regls. No. 43,176  
Brian T. Geisler, Regls. No. 54,115

Send Correspondence to: Anthony Niewyk  
BAKER & DANIELS  
111 East Wayne Street, Suite 800  
Fort Wayne, Indiana 46802

Direct Telephone Calls to: (name and telephone number)  
Anthony Niewyk (260) 424-8000

Full name of sole or first inventor Scott A. Corbin	
Sole or first inventor's signature <i>Scott A. Corbin</i>	Date 29 Mar 2004
Residence Stevens, Pennsylvania	
Citizenship United States	
Post Office 38 Summers Drive	
Stevens, Pennsylvania 17578	

Full name of second inventor, if any	
Second inventor's	Date
Residence	
Citizenship	
Post Office	